## STATE OF WYOMING APPLICATION FOR CERTIFIED COPY OF BIRTH CERTIFICATE

A request for a certified copy of a birth certificate should be submitted on this form along with the fee of \$12.00 per copy. Money orders or a personalized check from the person making the request should be made payable to VITAL RECORDS SERVICES. Please enclose a self-addressed, stamped envelope with the application.

end to:		tal Records Services Hathaway Building eyenne, WY 82002 (307) 777-7591	
ertificate, and yo	ur \$12.00 fee will be	e, you will be sent in retained as a search	
nciosea is \$	tor	certified copy(s).	
Full Name at Birth	First	Middle	Last (Maiden Name)
If this birth could be r	ecorded under another name	, please list that name here:	
Sex Date	of Birth (Month, Day and Ye	ar)	City or County of Birth
Mother's Maiden Nan	ne First	Middle	Maiden Last Name
Father's Name	First	Middle	Last
	rhose certificate is being required. Legal guardia	n must submit a copy of gu	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
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The fee listed above includes a surcharge for the Wyoming Children's Trust Fund used to establish programs for the prevention of child abuse and neglect. Wyoming Statute § 35-1-428 requires Vital Records Services to collect this surcharge on all certified copies and searches of the files.